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SLATER & MATSIL LLP 17950 PRESTON ROAD SUITE 1000				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
DALLAS, TX 7	5252		· [			(Depositor's name)	
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					<del></del>	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	A	TTORNEY DOCKET NO.	CONFIRMATION NO.	
10/733,217 12/11/2003		Axel Brintzinger	2002 P 12234 US 8003				
TITLE OF INVENTION	: METHOD FOR FORM	IING THREE-DIMENSI	ONAL STRUCTURES O	N A SUBSTRATE		. ,	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0	\$1740	01/09/2008	
EXAMINER		ART UNIT	CLASS-SUBCLASS	]			
THOMAS, TONIAE M		2822	438-652000				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			(1) the names of up to or agents OR, alternati (2) the name of a sing registered altorney or 2 registered patent atto	printing on the patent front page. list names of up to 3 registered patent attorneys ats OR, alternatively, name of a single firm (having as a member a red attorney or agent) and the names of up to tered patent attorneys or agents. If no name is no name will be printed.    Slater & Matsil, L.L.P.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Infineon Technologies AG  Munich, Germany							
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent) :	Individual 🛭 Corp	oration or other private gr	oup entity Government	
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Typed or printed name Ira S. Matsil			Date   12 (200 )				
	nation is required by 37 C stiality is governed by 35 d application form to the ions for reducing this bu /irginia 22313-1450. DO	FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the D NOT SEND FEES OR	on is required to obtain or 1.14. This collection is es depending upon the indice Chief Information Offic COMPLETED FORMS T			d by the USPTO to process) ng gathering, preparing, and me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450.	

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